FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR JNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Number: 3235-0076					
Expires: Apri	il 30,2008				
Expires: April 30,2008 Estimated average burden					
hours per respon	16.00				

SEC US	E ONLY
Prefix	Serial
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DATE RE	CEIVED
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Name of Offering (check if	this is an amendment and name has changed, and indicate change.)	RI CLIVED
Filing Under (Check box(es) that a Type of Filing: New Filing	Apply): Rule 504 X Rule 505 Rule 506 Section 4(6) Rule 506 Section 4(6)	O ULOE AUG 2007
	A. BASIC IDENTIFICATION DATA	
1. Enter the information request	ed about the issuer	(A) 136 (E)
	s is an amendment and name has changed, and indicate change.) Evelopment Company, LLC	
Address of Executive Offices 8040 Hosbrook Road	(Number and Street, City, State, Zip Code) , Suite 400, Cincinnati, OH 45236	Telephone Number (Including Area Code) (513) 381-1200
Address of Principal Business Ope (if different from Executive Office	, , , , , , , , , , , , , , , , , , , ,	Telephone Number (Including Area Code)
Brief Description of Business	Ownership, development and sale of 42 ur located in Delray Beach, Florida	nit condominium project
Type of Business Organization	limited partnership, to be formed	olease specify): limited liability company DROCECC
Actual or Estimated Date of Incorp Jurisdiction of Incorporation or O	Month Year poration or Organization: 016 017 × Actual Estin rganization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	nated 7 AUG 1 6 2007
GENERAL INSTRUCTIONS		MOWSON

-INANCIA!

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

· ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner General and/or Check Box(es) that Apply: X Promoter Executive Officer Director Managing Partner Full Name (Last name first, if individual) Jacobs, Terry S. Business or Residence Address (Number and Street, City, State, Zip Code) 8040 Hosbrook Road, Suite 400, Cincinnati, Ohio 45236 Check Box(es) that Apply: Promoter | Beneficial Owner | Executive Officer | Director General and/or Managing Partner Full Name (Last name first, if individual) Jacobs, Jeffrey C. Business or Residence Address (Number and Street, City, State, Zip Code) 8040 Hosbrook Road, Suite 400, Cincinnati, Ohio 45236 General and/or Promoter Beneficial Owner X Executive Officer Director Managing Partner Full Name (Last name first, if individual) Kemer, Kevin M. Business or Residence Address (Number and Street, City, State, Zip Code) 8040 Hosbrook Road, Suite 400, Cincinnati, Ohio 45236 Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Mustard, Larry E. Business or Residence Address (Number and Street, City, State, Zip Code) 8040 Hosbrook Road, Suite 400, Cincinnati, Ohio 45236 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	s is carried		4.1		B. II	IFORMAJ J	ON ABOU	I OFFERI	VG : ₹®				
1	Une the	issuer sold	or door th	o icena- i-	stand to cal	l to see a	araditad is	wastors in	this offsei	n a ')		Yes	No
l.	nas inc	122net 2010	i, or uoes iii			Appendix,				_	***************************************	X	
2.	What is	the minim	um investm					-				s 300	,000
							•					Yes	No
3.		e offering p	-	· ·	_							Ø	
4.	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								ne offering. with a state				
Full Name (Last name first, if individual) N/A													
Bus	siness or	Residence	Address (N	lumber and	l Street, Ci	ty, State, Z	ip Code)						
Nan	ne of Ass	sociated Br	oker or De	aler									
Stat	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers	· <u>-</u>		·~~~~			
	(Check	"All States	" or check	individual	States)								States
	AL	[AK]	AZ	AR	[CA]	[<u>co</u>]	[CT]	DE	[DC]	[FL]	[GA]	HI	[ĪD]
	IL	IN	ĪA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT)	NE)	NV)	(NH)	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	R1	[SC]	[SD]	TN	TX]	UT	VT	[VA]	WA	WV]	WI	WY	[PR]
Ful	l Name (Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nar	me of Ass	sociated Br	oker or De	aler	-								
Stat	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)										
			or check									☐ AI	l States
	[AL]			indiviđual	States)		••••						
	AL IL	AK IN	a" or check AZ IA					DE MD	DC MA	FL MI	GA MN	HI MS	I States ID MO
	IL. MT	AK IN NE	AZ IA NV	individual AR KS NH	States) CA KY NJ	CO LA NM	CT ME NY	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
	IL.	AK IN	AZ IA	individual AR KS	States)	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
Ful	IL MT RI	AK IN NE	IA IA NV SD	AR KS NH	States) CA KY NJ	CO LA NM	CT ME NY	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
	IL MT RI I Name (AK IN NE SC	AZ IA NV SD first, if inde	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
Bus	IL MT RI I Name (AK IN NE SC Last name	AZ IA NV SD first, if index	AR KS NH TN ividual)	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
Bus	IL MT RI I Name (siness or me of As	AK IN NE SC Last name	AZ IA NV SD first, if index Address (I	Individual KS NH TN ividual) Number an	CA KY NJ TX	CO LA NM UT	ME NY VT VT	DE MD NC VA	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
Bus	IL MT RI RI Name (siness or me of As	AK IN NE SC Last name r Residence	AZ IA NV SD first, if indi Address () oker or De	AR KS NH TN ividual) Number an	CA KY NJ TX d Street, C	CO LA NM UT City, State, 2	CT ME NY VT Zip Code)	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK W1	HI MS OR WY	ID MO PA
Bus	IL MT RI RI Name (siness or me of As tes in Wi (Check AL	AK IN NE SC Last name r Residence sociated Br hich Person "All States	AZ IA NV SD first, if index Address (I oker or De Listed Has or check AZ	AR KS NH TN ividual) Number an aler s Solicited individual	CA KY NJ TX d Street, C or Intends States)	CO LA NM UT City, State, 2 to Solicit	CT ME NY VT Zip Code)	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK W1	HI MS OR WY	ID MO PA PR
Bus	IL MT RI RI I Name (siness or me of As tes in Wi (Check	AK IN NE SC Last name Residence sociated Br hich Person "All States	AZ IA NV SD first, if index Address (I) roker or De Listed Has " or check	AR KS NH TN ividual) Number an aler s Solicited individual	CA KY NJ TX d Street, C	CO LA NM UT	CT ME NY VT Zip Code)	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK W1	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	9,300,000	\$ 9,300,000
	Equity	S	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	S	\$
	Partnership Interests		
	Other (Specify)		
-	Total	9,300,000	<u>\$9,300,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	24	\$ 9,300,000
	Non-accredited Investors		s
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	·	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] \$
	Printing and Engraving Costs] \$
	Legal Fees	5	3 \$ 5.,000
	Accounting Fees	[] \$
	Engineering Fees] \$
	Sales Commissions (specify finders' fees separately)] \$
	Other Expenses (identify)] \$
	Total		S5_000

	and total expenses furnished in response to Part C	Tering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross		\$9,295,000
5.	each of the purposes shown. If the amount for	proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and l of the payments listed must equal the adjusted gross art C — Question 4.b above.		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Sataries and fees			s
	Purchase of real estate			X \$ 9,295,000
	Purchase, rental or leasing and installation of n		 •	
				- -
		facilities	_1.2	_ 🔲 \$
	Acquisition of other businesses (including the offering that may be used in exchange for the a issuer pursuant to a merger)		71 5	
				_
				_
	•		\$	_
	Total Payments Listed (column totals added)		x \$ 9	,295,000
		D. FEDERAL SIGNATURE		4 . 4
sig	nature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this notice furnish to the U.S. Securities and Exchange Commission of the first investor pursuant to paragraph (b)(2) of the first investor pursuant to paragraph (b)(2	ssion, upon writt	
Iss	uer(Print or Type) JFP Seashorse Development Company, LLC	Signature Sarray Auroba	Date July <u>3</u>	<u>\</u> , 2007
Na	me of Signer (Print or Type)	Title of Signer (Frint or Type)	_	
	Terry S. Jacobs	President		

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🔼
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
JFP Seahorse Development Company, LLC	Verry S. Jacoby	July 31, 2007
Name (Print or Type)	Title (Print of Type)	
Terry S. Jacobs	President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Intend to sell to non-accredited investors in State (Part B-Item 1) State Yes No Intend to sell to non-accredited investors in State (Part C-Item 1) AK AZ Intend to sell Type of security and aggregate offering price offered in state (Part C-Item 1) Type of investor and amount purchased in State (Part C-Item 2) Number of Accredited Investors Amount Investors Amount Amount Investors Amount	Disquali under Sta (if yes, explana waiver ((Part E-	te ULOE attach tion of granted)
State Yes No are contingent profit interest notes Accredited Investors Amount Investors Amount [Yes	
AK [No
A7		
AR [
CA		
co		
CT X (1) \$1,200,000 3 \$1,200,000 0 0		X
DE		
DC		
FL X (1) \$1,500,000 4 \$1,500,000 0		X
GA L		
н		
ID		
IL		
IN X (1) \$300,000 1 \$300,000 0		X
IA A		
KS		
KY		
LA		
ME		
MD X (1) \$750,000 3 \$750,000 0 0		X
MA	7	
MI L		
MN		
MS MS		

1	Intend to non-a investor	2 I to sell ccredited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО		Х	(1:)0300,000	1	\$300,000	0	0		Х	
МТ										
NE										
NV										
NH										
NJ		Х	(1)150,000	1	\$150,000	0	0		X	
NM										
NY		X ·	(1) 1,800,000	4	\$1,800,000	0	0		X	
NC										
ND										
ОН		X	(1) 1,500,000	2	\$1,500,000	0	0		Х	
OK										
OR										
PA		Х	(1) \$450,000	2	\$450,000	0	0		X	
RI										
SC										
SD										
TN										
TX										
UT		Χ	(1) \$150,000	1	\$150,000	0	0		X	
VT										
VA		<u>χ</u>	(1) \$600,000	2	\$600,000	0	0		_x	
WA										
WV	***************************************									
WI										

				APP	ENDIX 🐪					
-	Intend to non-a investor	2 I to sell accredited s in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)			amount purchased in State			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY PR										

END